Issue	Classification	

Application I	No. A	Applicant(s)							
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Examiner		urt Unit		•					
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			ORIC	SINAL			CROSS REFERENCE(S)										
	CLAS	SS		SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)											
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(Assistant Examiner) (Date)					- e)	-	on T. Ngu	m		Total Claims Allowed: 35							
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	(Le	gal	hstrun	nents Examiner)	(Date)	(Primary Examiner) (Date) 32 1											

	laims	ns renumbered in the same order as presented by applicant						☐ CPA			☐ T.D.			☐ R.1.47					
Final	Original		Final	Original		Final	Original		Final	Original		Final	Original	•	Final	Original		Final	Original
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	7		30	32			62			92			122			152	1		182
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8	9			39			69			99			129			159			189
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18	11			41			_71			101			131			161			191
19	12			42			72			102			132			162			192
20	13			43			73			103			133			163			193
21	14			44			74			104			134			164			194
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28	23			53			83			113			143			173			203
26	24			54			84			114			144			174			204
11	25_			55_			85			115			145			175			205
12	26			56			86			116			146			176			206
13	27			57			87			117			147			177			207
14	28			58			88			118			148			178			208
15	29			59			89			119			149			179			209
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